IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 21985 2

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM

PIN # 4636941385

APPLICANT: CHARLES CHARLES D TEAL APPLICANT ADDRESS: 116 RING NECK TR

SITE ADDRESS: 116 RINGNECK Trail MOORESVILLE PHONE: ALT. PHONE:

SITE DIRECTIONS: BSR - TL CANVASBACK - TL BROADBELL - TL RINGNECK - ON RT

SUBDIVISION: WOOD LAND HILLS SECTION: 8 LOT # 104 LOT AREA: .61 DESIGN FLOW: 360 L.T.A.R.: EXISTING

Septic Tank	(gal)	STB	Date	☑ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	☑ Residence	No. Bedrooms	3	Water Supply
Pump Tank	(gal)	PT	Date	System Description: GRAVITY 2500 NEW				☐ Business	No. Persons	6	☐ Private
Pump Make	Model	EXISTING	Serial #	Repair System Description: LPPBPS				☐ Other	No. Employees		☐ Public
# Nitrification Fields	# Lines	1	Linear Ft: 4+1	Maintenance Agreement Required:	☐ YES	☑ NO		☐ Slab	☑ Crawl Space		☑ Community
Trench Width 36"	Max. Trench Bottom Depth	EXISTING +36	Gravel Depth N/A		☑ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing			☐ Basement w/o plumbing

Comments / Conditions:

INITIAL SITE SKETCH

See Michael Athens & Associates Design.

AS BUILT SKETCH

Permit can be suspended or revoked if any false information is supplied toward securing the permit / any unauthorized changes are made to the site / any unauthorized changes are made in the installation of the system. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☐ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☐ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Charlotte C. Teal Date: 9-8-16

IMPROVEMENT PERMIT by: Date: 9/8/16

AUTHORIZATION TO CONSTRUCT by: Date: 9/8/16

Installed by: FJ ERWIN

OPERATION PERMIT by: Date: 9-23-16

Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK

plat book 21, page 13, that the ratio of precision is 1':10,000, that this map was prepared in accordance with the General Statutes of North Carolina Chapter 89C my hand and seal on the 24, day of AUGUST, A.D. 20 16.

WILLIAM M. ALLEN, PLS L3499

NORTH CAROLINA PROFESSIONAL SEAL L3499 LAND SURVEYOR WILLIAM M. ALLEN

PB. 21 PG. 13

MALLARD HEAD DEVLOPMENT CORP. 629/866

N22°11'12"E 129.94'

#5 REBAR

KEYSTONE WALL

COVERED PATIO

FOUNTAIN

FOUNTAIN

#5 REBAR

35' SETBACK

CUT OFF + CREATE DAM

ALUMINUM FENCE

SEPTIC

PROPOSED POOL

CONC.

26.7'

2 STORY BRICK COMP. ROOF

15' SETBACK

CONCRETE DRIVE

35.3'

198.70'

(BASE BEARING) N74°44'39"W

S75°08'58"E 217.02'

LOT 103 STEPHEN E. MCKEOWN 1634/2117

LOT 104 0.61 AC.

Repair Area

LOT 105 JOSEPH B. TALTON 2342/603

KEYSTONE WALL ENCROACHES

35' SETBACK

SEPTIC

R/W

(TIE ONLY) N04°04'33"E 96.78'

#4 REBAR

PK NAIL

R=797.64 A=135.04'

(CHORD BEARING) S29°51'10"W 134.88'

BENT #4 REBAR

RINGNECK TRAIL 60' PUBLIC R/W

RINGNECK TRAIL 60' PUBLIC R/W

VICINITY MAP NO SCALE

BRAWLEY SCHOOL ROAD

CANVASBACK ROAD

WILLIAMSON ROAD

BROADBILL DRIVE

SITE

SEPTIC LEGEND
R = RED
B = BLUE
Y = YELLOW
W = WHITE
O = ORANGE

0' 20' 40' 100'

SCALE IN FEET

NOTES

1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENTS AND/OR

LEGEND

= P.P. = POWER POLE



MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887

Reference: Data Sheet for 116 Ring Neck Tr. Woodland Hills Lot 104
House Footprint: See attached plan
Building Setbacks: 35' front/rear, 15' side
Water Source: Community water
Number of Bedrooms: 3/360 GPD
Predetermined LTAR: 0.3 GPD/FT2 (ICHD)
Proposed System Type: Existing conventional + 25% Reduction
Proposed Repair System Type: PPBPS
Distribution: Drop boxes/end cap
Septic Tank Size: 1000 gallon (existing)
Proposed Trench Bottom: 36" maximum



Line	Design Length	Actual Length
Orange 1	**36'**	**100' (existing)**
White 2	**42'**	**100' (existing)**
Yellow 3	**100'**	**100' (existing)**
Orange 4	**100'**	**100' (existing)**
Blue 5	**92'**	**100' (new 25% Reduction)**
Yellow 6		20'
Orange 7		70'
Blue 8		70'
White 9		70'

Initial System: 278' conv. + 92' 25% Reduction **Repair System:** 230'

Comments:
MA&A evaluated this property for a pool addition. The existing system is 4 conventional lines at 100' length. In order to fit the pool, the first two lines must be shortened and a new line installed. The existing lines must be excavated 15' from the pool and a earthen dam created. The current fence and concrete walkway will be removed. The repair area is less than 2% grade. The remained conventional system will be 278' leaving 122' of conventional to replace. We are proposing to add 92' of 25% Reduction system as equivalent. The system currently uses a distribution box. This will need to be change to drop boxes. The soils in the initial and repair areas were previously approved by ICHD. The surveyor has located all septic lines.

RECEIVED AUG 29 2016

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

#219852

Application For:
( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) Septic Improvement Permit (X) Authorization to Construct ( ) Existing System Inspection ( ) Septic System Repair

THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS.

Page 2: *Site Plan Worksheet* form MUST accompany this application Relocation - Pd $350.00

The following optional attachments may also be submitted: (X) Survey Plat, scaled no more than 1 inch = 60 feet
Place an (X) beside whichever is submitted if applicable ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information:

Applicant Name: Charles + Vanetta Teal **Address:** 116 Ring Neck Trl. Mooresville NC 28117 **Phone:** 704 677-2457

Owner Name: Same **Address:** _____ **Phone:** _____

Property Information:

Street Address: 116 Ring Neck Trl

Subdivision Name: Woodland Hills **Section/Phase:** _____ **Lot Number:** 104

Driving Directions: BSR, TL Canvasback, TL Broadbill, TR Ring Neck, on Rt

Site Development Information: *(check or complete ALL that apply)*

( ) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: 3
Maximum Number of Occupants: _____
(X) Swimming Pool
( ) Other Addition/Structure: _____

( ) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

Non-Residential Site Development:
Type of Business: _____
Square Footage of Building: _____
Maximum Number of Employee: _____
Maximum Number of Seats/Beds/Other: _____

Water Supply:

( ) New Well ( ) Existing Well (X) Community Well ( ) City Water ( ) Other Public Water

Desired Septic System Type: *(you may rank in order of preference)* **Year existing system installed:** 1997
( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional (X) Other: Accepted

Please answer the following to the best of your ability:

( ) Yes (X) No **Does the site contain any jurisdictional wetlands?**
( ) Yes (X) No **Is any non-domestic sewage (i.e. industrial) to be generated?**
( ) Yes (X) No **Is the site subject to approval by any other public agency?**

I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

Signature: _____ 8/29/2016
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) **DATE**

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

Applications for permits require the "signature of the owner or owner's legal representative" (15A NCAC 18A .1937). If the owner does not sign the application himself or herself, they can submit any one of the following documents to designate their legal representative:

Power of Attorney; Real Estate Contract; Estate executor; Bankruptcy trustee; Court ordered guardianship

In the absence of the above documentation, the property owner may provide the local health department with documentation that designates a legal representative. A property owner may:

Complete this form to document his or her legal representative, or provide his or her own form that contains the information in this form.

If there are multiple property owners, then all property owners must sign the form that designates a legal representative.

By signing a form that designates a legal representative for purposes of 15A NCAC 18A .1937, the property owner authorizes that representative to act on their behalf in matters pertaining to the application and permitting process, including signing or receiving any application, document or permit. The owner retains full responsibility to meet all permit conditions specified by the local health department.

I, Vanetta C. Teal, am the legal owner(s) of the property located at 116 King Nook Trl, Woodland Hills 104, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Michael Athanas & Assoc., to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

- Application for Improvement Permit (IP) / Authorization to Construct (AC)
- Improvement Permit (IP) / Authorization to Construct (AC)
- Application for soil-site evaluation (new/repair)
- Application/permit for private drinking water well/well abandonment
- Application for Compliance Inspection

I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

Vanetta C. Teal	8-29-2016		8/29/2016
Signature of Owner(s)	Date	Signature of Witness	Date

Please return this signed form to the appropriate office:

Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

IREDELL COUNTY HEALTH DEPARTMENT

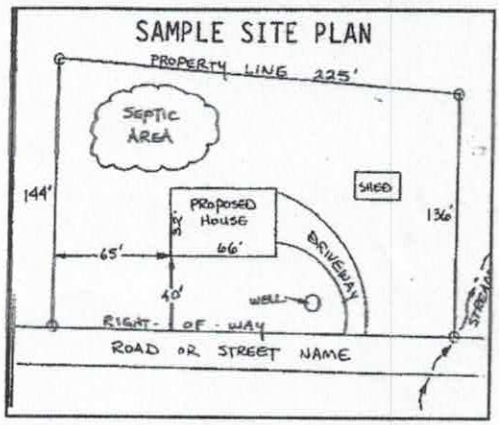
ENVIRONMENTAL HEALTH DIVISION

PAGE 2: *SITE PLAN WORKSHEET*

SEE THE "SAMPLE SITE PLAN" BELOW. *INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!*

Place an (X) beside each item as you complete the site plan:

- ( ) **Property Line measurements are clearly identified**
- ( ) **All proposed structures are indicated**
- ( ) **Front and side setbacks from property line**
- ( ) **Preferred driveway location and well location**
- ( ) **Area you prefer your septic system to be placed**
- ( ) **North arrow, or other sufficient indicator of direction**



Circle N/A on the following if appropriate:

Location of septic systems and wells within 100' of your property	**N/A**
Location of easements and rights of ways on your property	**N/A**
Location of any designated wetlands on the property	**N/A**

USE THIS SPACE TO DRAW YOUR SITE PLAN

Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site

See Attached Plan.

Signature: _____

Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

8/22/2016

DATE

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

AUTHORIZATION TO CONSTRUCT (1000)

PROPERTY DESCRIPTION NO. 26172 DATE 2/21/97 TAX MAP NO 4636941385

OWNER OR CONTRACTOR KEN KOONTZ PHONE: Business 662-6556 Home Watershed Yes No

ADDRESS 191 KEATS RD MOORESVILLE NC 28115

LOCATION BAWLEY SIDE RD. - TL CANVASBACK - TL BROADBILL - TR RING NECK - 3RD LOT ON RT.

SUBDIVISION MIDLAND HEIGHTS BLOCK / SECTION 8 LOT 104 LOT AREA ~ SITE CLASS RS DESIGN FLOW 360 GPD LTAR .3600/FT

Septic Tank: 1000 Gallons STB 825 Date 3/22/98

Pump Tank: Gallons PT Date

Pump Make: Model: Serial No

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 6 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: ☐ I, II, IV, V, VI

System Description: GRAVITY CONVENTIONAL

Repair System Description: 1/1 PUMP CHAMBER FOR

Maintenance Agreement Required: ☐ Yes ☐ No SIMILAR

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2½

☐ Business No. Employees

☐ Other

☑ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

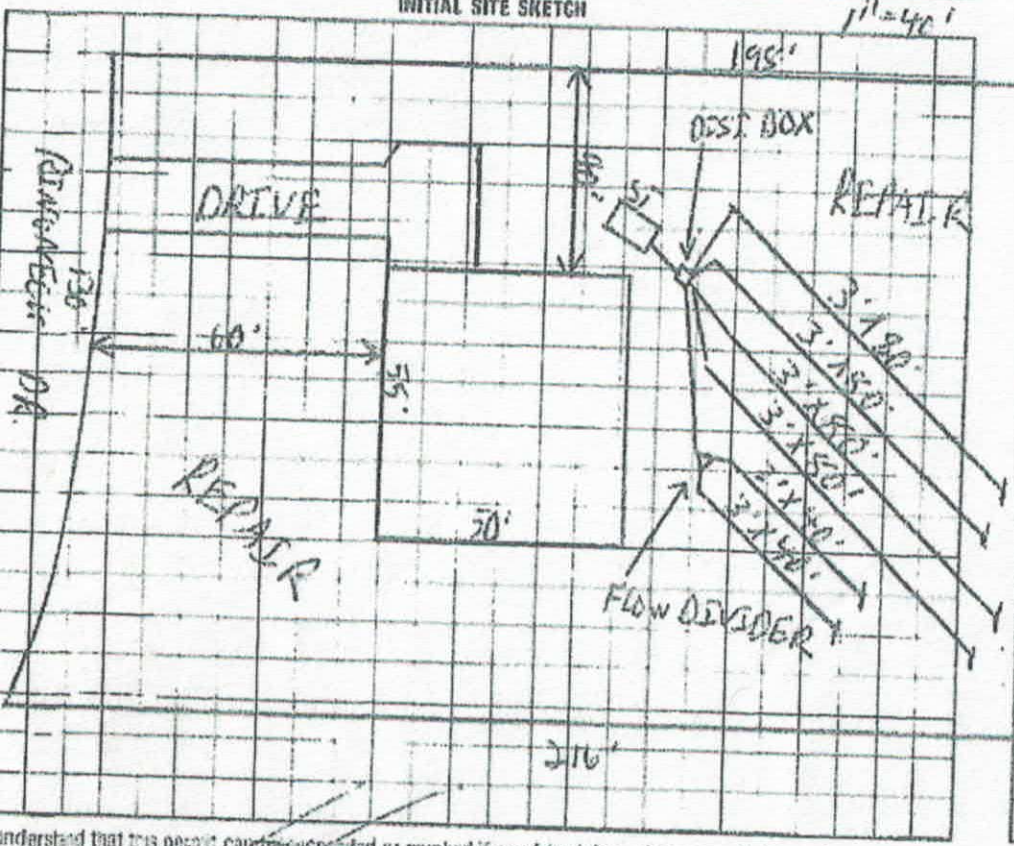
Water Supply: ☐ Individual ☑ Community ☐ Public

Comments:

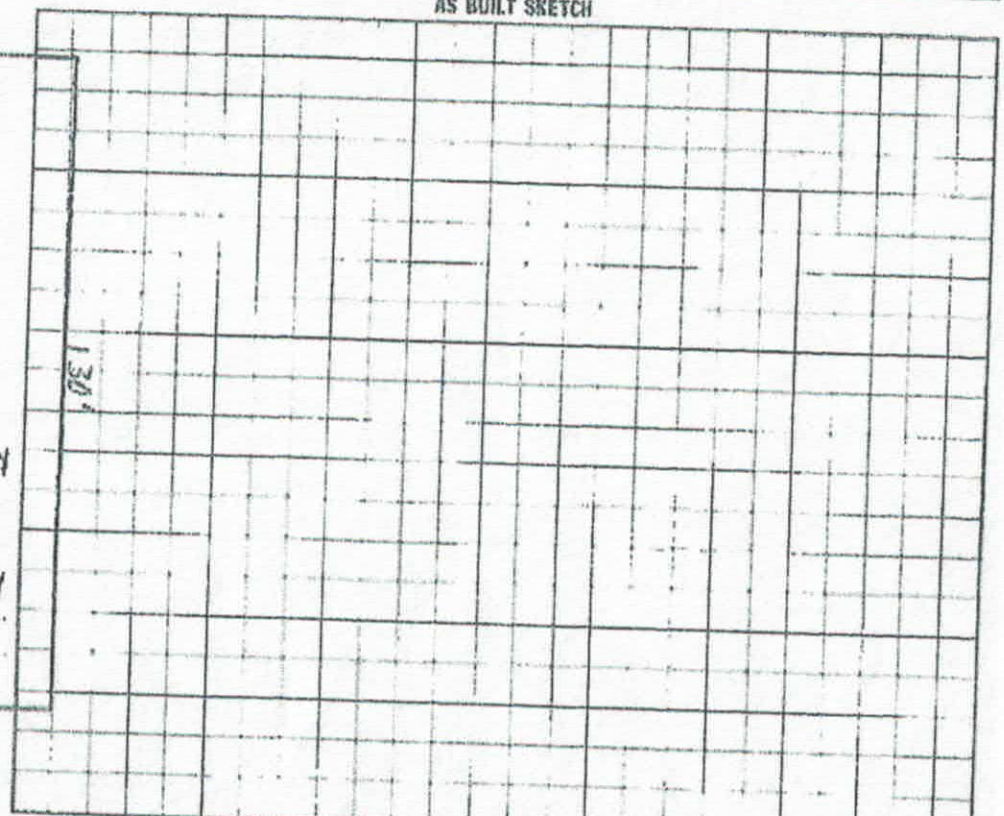
Comments: 4 @ 100'

INITIAL SITE SKETCH

1" = 40'



AS BUILT SKETCH



I understand that this permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system

Applicant

Improvement Permit by date 2-27-97

AUTHORIZATION

Installed by: WAYNE CLONTZ

Certificate of Completion by date

IREDELL COUNTY

PO Box 788
349 North Center St.
Statesville, NC 28677

APPLICATION NUMBER
219852
Issue Date: 06/27/2016

ZONING PERMIT

Parcel Number	Street Address	Jurisdiction
4636941385.000	116 RINGNECK TRAIL, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: TEAL CHARLES A+VANETTA	Applicant: TEAL CHARLES A+VANETTA
Address: 116 RINGNECK TRAIL MOORESVILLE, NC 28117	Address: 116 RINGNECK TRAIL MOORESVILLE, NC 28117
Phone:	Phone:

Use Requested	Zone Code
POOL	R20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.610		10.00	10.00	10.00	CACL	X

Remarks:

Swimming Pool Zoning Permit: Pools shall be located to comply with minimum setbacks requirements for accessory buildings and structures of the district in which located. Pools which are not an integral part of the principal building shall be located at least the minimum distance from the principal building necessary to comply with N. C. Building Code requirements. Pools shall be protected by a fence of equal enclosure, a minimum of four feet in height, and equipped with self-closing and positive self-latching gate to provide with hardware for permanent locking. Fencing Is NOT required for above ground pools if they are at least four (4) in height, the ladder is removed, or when NOT in use have a gate to the ladder as described above.

The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions, plat conditions and other contractual agreements will not be undertaken by Iredell County and is the sole responsibility of the affected parties.

Applicant: _____ Date: _____

Permit Number	72758	TOTAL FEES:	$ 77.25